

# Haringey's Children and Young People's Plan 2013 – 2016

## Appendix A

***Haringey is a place where children  
and young people thrive and  
achieve***

<b>Document details</b>		<b>Haringey's Children and Young People's Plan 2013-16</b>	
Authors	Helena Pugh, Kirsty Fox & Liz Marnham, Strategy & Business Intelligence, Haringey Council		
Lead Officer	Lisa Redfern, Director, Children & Young People Services (Interim), Haringey Council		
<b>Version History</b>			
<b>Version</b>	<b>Change/Reasons for Change</b>	<b>Date</b>	
V0.1	Initial scoping draft	19 April 2013	
V0.2	Pre consultation draft	20 June 2013	
V0.3	Consultation draft	12 July – 9 August 2013	
<b>Approval history</b>			
<b>Version</b>	<b>Approving body</b>	<b>Date</b>	
V1.0	Children's Trust	24 September 2013	
	Cabinet	12 November 2013	
	Full Council	18 November 2013	
Scheduled review date	September 2016		

Foreword	3
1. Introduction	4
2. Haringey's children and young people	6
3. Vision and scope	6
4. Principles	7
5. Outcomes	9
Outcome 1: Quality services .....	9
Outcome 2: Every child has a healthy start in life.....	11
Outcome 3: Thriving families .....	13
Outcome 4: Raised educational attainment.....	15
Outcome 5: Children and young people are safer from the risk of harm..	18
6. Delivering and monitoring this plan	20
Appendix 1: Haringey Children's Trust	21
Appendix 2: Key achievements 2009-2013	22
Appendix 3: How we developed this plan	24
Appendix 4: Equalities Impact Assessment Summary	27
Appendix 5: The national context	30

## Foreword

We are delighted to introduce the Haringey Children's Trust<sup>1</sup>'s Children and Young People's Plan 2013-16. We have set our sights high for children and young people in Haringey: we want them and their families to benefit from outstanding services as we work towards a borough that is a fantastic place in which to be a child. Our ambition builds on the improvements made by partner agencies since the launch of Haringey Children's Trust's previous plan<sup>2</sup> in 2009.

We achieved record A-Level, GCSE and Key Stages 1 and 2 results this year, and in addition a high proportion of our schools are now rated as good and outstanding – including all secondary schools. We have seen falling teenage pregnancy rates; a reduction in the numbers of young people entering the criminal justice system; a stronger focus on children and families in greatest need of support, and a major regeneration scheme that is offering a once-in-a-lifetime opportunity to improve quality of life for children and families in Tottenham.

But we know that we need to build on this progress and deliver further improvements through effective partnership working. Tackling poverty and inequality is a key priority in Haringey – we will work together to stop disadvantage passing from generation to generation.

---

<sup>1</sup> See Appendix 1 for a description of Haringey's Children's Trust.

<sup>2</sup> See Appendix 2 for examples of key achievements from 2009-13.

The Trust is committed to a prevention and early help approach – addressing issues that children and their families face before they develop into more serious problems. Local services are undergoing a transformation through the [Haringey 54,000](#) programme which is changing the relationship with the borough's families, providing help early on when difficulties first arise and ensuring families can access the right services at the right time, as well as working with families with complex needs. This approach will increasingly be reflected across our partnership.

The ambitious work plan developed by Haringey Children's Trust partners will bring us together to promote positive childhood and family life across the borough.

### *Insert signature*

#### **Cllr Ann Waters,**

Lead Member for Children  
Chair, Haringey Children's Trust

### *Insert signature*

#### **Lisa Redfern,**

Director for Children and Young People's Services (Interim),  
Haringey Council

## 1. Introduction

[Haringey Children's Trust](#) is committed to delivering high quality, joined up and inclusive services for children and young people, giving them the opportunity to achieve their potential.

The plan:

- **is the high level, strategic document that informs the Children's Trust's work programme, setting out our intentions for improving the life chances for Haringey's children and young people over the next three years, from 2013 to 2016**
- **demonstrates our aspiration to enable the Children's Trust Board to commission services and interventions for children and young people in Haringey which meet the plan's priorities**

Central to this plan is the Trust's recognition that all the agencies working with children and young people – in the statutory, voluntary and independent sectors - can deliver more by working together with children, young people and their families and in partnership with each other than by working alone. All our work is crucial to delivering high quality services and to the success of this plan.

The location of key services is shown overleaf.

The plan includes activities that Children's Trust organisations will deliver together. It builds on our previous work and two development workshops with Children's Trust members and takes account of both the national context and local issues<sup>3</sup>.

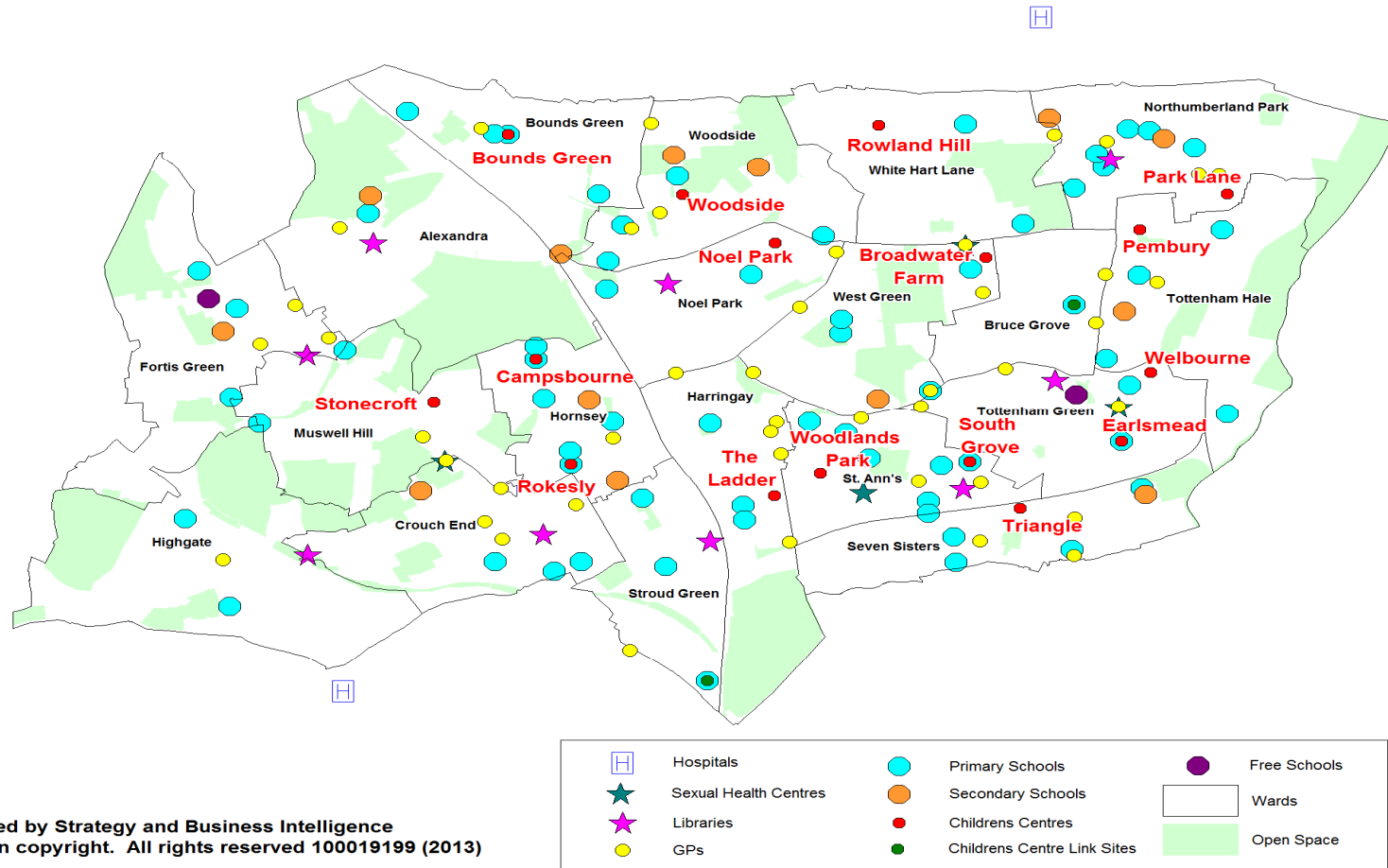
This plan has been written in the context of the Government's deficit reduction measures, which have led to a decline in public sector funding and an increased need to target funding at and ensure support for those in greatest need. Changes in the economic climate and to the welfare system are likely to impact on levels of child poverty, homelessness and overcrowding. It is estimated that welfare reform will see an increase in demand for local services such as health, housing and access to play areas. In contrast there are new opportunities available to improve outcomes within the borough with funding for the Troubled Families Initiative as well as the Pupil Premium.

For a full picture of all work across the borough to improve the lives of children and young people, this plan should be read alongside other council strategies and the business plans of each organisation.

---

<sup>3</sup> Appendix 3 describes how this plan was developed; Appendix 4 summaries the equalities impact assessment; Appendix 5 summarises the current national context for this plan.

# Location of key services in Haringey



## 2. Haringey's children and young people

### Haringey has:

- A young population – 63,600 children aged 0-19 – a quarter of all residents. (2012 Mid Year Estimates ONS)
  - 18,300 aged 0-4 (29%)
  - 16,100 aged 5-9 (25%)
  - 14,900 aged 10-14 (23%)
  - 14,200 aged 15-19 (22%)
- A higher proportion of children and young people live in the east of the borough (56% of 0-19 year olds live in the Tottenham Parliamentary Constituency and 44% live in Hornsey and Wood Green). (2012 Mid Year Estimates ONS)
- One of the most ethnically diverse populations in London; 79.1% of children at Haringey schools are minority ethnic pupils. (Department for Education Jan 2013 Pupil characteristics)
- 51.3% of pupils with a first language other than English. (Department for Education Jan 2013 Pupil characteristics)
- A mobile population – many families move in and out of the borough.

For further needs information about Haringey's children and young people see <http://www.haringey.gov.uk/index/children-families/cyp.htm>.

## 3. Vision and scope

### Vision

***Haringey is a place where children and young people thrive and achieve***

Our vision is for **all** children and young people to thrive and achieve irrespective of their starting point.

The plan covers:

- All children and young people aged 0 – 19
- Those over 19 receiving services, including those leaving care
- Those aged between 19 and 25 with special needs

To achieve this vision we will focus on addressing the difference in outcomes for children and young people in terms of their educational attainment, health and safety depending on where they live in the borough. The outcomes we are working towards are shown below.

### Outcomes

**Outcome 1: Quality services**

**Outcome 2: Every child has a healthy start in life**

**Outcome 3: Thriving families**

**Outcome 4: Raised educational attainment**

**Outcome 5: Children and young people are safer from the risk of harm**

## 4. Principles

The following **principles** will be integral to the way we work.

Principles	Why we have chosen this
<p><b>Promoting prevention, early help and intervention:</b></p> <ul style="list-style-type: none"> <li>Ensuring that universal services provide early advice and support to families to give children and young people the best start in life and try to prevent problems from escalating.</li> <li>Identifying need and supporting children, young people and families at the earliest possible stage.</li> <li>Changing our focus to a preventative and early intervention approach, shifting ways of working and resources to support this.</li> </ul>	<p>Prevention, early help and intervention both in the early years of a child's life and at any time a problem arises can have a significant positive impact for a child's later life.</p> <p>This approach can help avert emotional and behavioural difficulties; under-attainment at school; truancy and exclusion; criminal behaviour; drug and alcohol misuse; teenage pregnancy, and the need for statutory social care.</p>
<p><b>Reducing inequality:</b></p> <ul style="list-style-type: none"> <li>Targeting additional resources as available to tackle issues known to cause inequality - such as child poverty, unemployment and exclusion - before they cause long-term damage to children's life chances.</li> <li>Ensuring that principles of fairness and social justice guide our priorities and actions.</li> </ul>	<p>Living in a low income family affects all aspects of a child's life - from economic and material disadvantages, to health and education, through to the personal and more hidden aspects of poverty associated with shame, sadness and the fear of difference and stigma.</p> <p>Evidence shows that those most affected locally are:</p> <ul style="list-style-type: none"> <li>those living in deprived parts of the borough</li> <li>those with special educational needs and disabilities</li> <li>those living in families where there is domestic violence, substance misuse or mental ill health</li> <li>those with multiple needs and Looked After Children</li> </ul>

Principles	Why we have chosen this
<p><b>Developing resilience and community participation:</b></p> <ul style="list-style-type: none"> <li>• Drawing on strengths within our communities to enable families to find solutions to their own needs wherever possible, and support them to help themselves through problems.</li> <li>• Encouraging children to make the most of their time at school and young people to develop skills for employment, leadership and local decision making and to choose healthy lifestyles.</li> <li>• Involving families in the design of their services.</li> </ul>	<p>In our consultation on early help residents told us they want to volunteer to assist others who need more help and we want to build on this social capital.</p> <p>It is good practice to deliver services in an accountable and transparent way.</p> <p>Working in this way will give children, young people and their families the information they need to hold to account those delivering services.</p>
<p><b>Ensuring best use of available resources:</b></p> <ul style="list-style-type: none"> <li>• Delivering services through a highly skilled and committed workforce, using opportunities to share learning experiences.</li> <li>• Benchmarking outcomes against statistical neighbours and learning from the best.</li> <li>• Exploring opportunities to integrate services where there is a business case to do so.</li> <li>• Releasing capacity by strengthening our early help offer to prevent more costly needs escalating.</li> </ul>	<p>Most of our resources are focused on children and young people with the most severe needs.</p> <p>By transferring resources to universal services and meeting lower level needs we can help reduce demand for more costly intensive services.</p> <p>To achieve this, we need a sound evidence-based approach to commissioning services.</p> <p>Those who deliver services to communities on a daily basis have the detailed, local knowledge that can help make them more efficient and effective.</p>



## 5. Outcomes

### Outcome 1: Quality services

#### Why this is important

Local families, young people and public services have the power to improve people's quality of life and enhance their opportunities and working together, in partnership we can really improve outcomes for Haringey's children and young people.

It is essential, therefore, that the services that we provide to children, young people and their families are timely, of high quality, efficient and continually improving. We need to demonstrate, through the services that we provide, that we understand the needs of Haringey's children and young people and that we are responsive to them. We need to make sure that we ask children and young people about their experience of using our services, and use this knowledge to improve the ways in which we work, ensuring that services are useful and responsive. We need to make sure that we provide feedback about what we are doing to service users so that they can rely on us and can trust us to do what we say we will.

#### Priorities

##### 1. Promote early help

- Ensure that children, young people and their families can easily find up to date information about the right services they might need, at the right time such as access to nurseries, childminders, children's

#### Priorities

- centres, health care etc
  - Ensure that children, young people and their families are involved in planning services that affect their lives
  - Refresh the Common Assessment Framework as an Early Help Framework that begins in universal settings and services
  - Re-commission youth services to strengthen targeted universal services
- ##### 2. Enhance partnership working
- Commission services in line with need and jointly wherever it makes sense to do so
  - Increase the integration of health and social care services for children with disabilities and special educational needs
  - Improve the way we manage and mitigate risk to reduce escalation amongst partners
  - Improve our sharing of data and information to ensure that services are continually improved, and families receive good outcomes
  - Develop the Children's Partnership as an advisory group meeting twice yearly to involve and engage partners in planning and delivery
- ##### 3. Strengthen our workforce
- Ensure Haringey has a strong, responsive, accessible, helpful, capable, professional workforce providing a really joined up approach, across health, education, leisure, social care and more specialist support when required
  - Provide continuous professional development for our workforce so

## Priorities

that they have shared, up-to-date knowledge and skills

## Outcome 1: Quality services

### Delivery work programmes

- The **council's** [Haringey 54,000](#) programme will help ensure more support is given to families at the right time, so they can bring up their children confidently without resorting to care. The programme aims to change how different agencies– social workers, health practitioners, and the police - work with children and their families, based on an 'Early Help' approach.
  - **Haringey Families First** is Haringey's approach to the national [Troubled Families](#) programme - focusing on families who have problems and who cause problems to the community, placing high costs on the public sector. Haringey Families First aims to get children back into school, reduce youth crime and anti-social behaviour and put adults on a path into work.
  - **Haringey Probation Service** [priorities](#) include the safeguarding of vulnerable children.
- [Haringey's Clinical Commissioning Group](#) (CCG) is the responsible body for making sure the people of Haringey can access safe, well co-ordinated, high quality health services. The CCG wants '*every child to have the best start in life and realise their full potential*'. The commissioned services will support children and young people, especially the most vulnerable, to live independent and healthy lives.
  - The [Barnet, Enfield and Haringey Mental Health Trust](#) (BEHMHT) objectives for 2013-18 are: excellent services and staff, integrated and holistic services, and developing new opportunities. The Trust is focussing on '*developing stronger collaborative partnerships with primary care, acute care and local authorities to address patients' mental and physical health needs*' in 2013-14.
  - Haringey **Police** priorities are set for each [Safer Neighbourhoods team](#). They are identified through meeting the community and dealing with those crimes and issues that residents have indicated cause the most concern.

## Outcome 2: Every child has a healthy start in life

### Why this is important

The [2010 Marmot review](#) identified that a good start in life; a decent home; good nutrition; quality education; sufficient income; healthy habits; a safe neighbourhood and a sense of community and citizenship as crucial to reducing health inequalities. Research shows that by the age of ten a child from a poorer background will have lost any advantage of intelligence indicated at 22 months; whereas a child from an affluent family will have improved his or her cognitive scores as a direct result of an advantaged background. Emotional wellbeing is key to children successfully adapting to adult life and achieving educational success, positive relationships and mental health.

Pregnancy and the first years of life have a critical impact on the life chances of children - and are when parents are most receptive to learning and change. Our biggest health challenges include childhood obesity, with rates in Haringey higher than London and England averages - and higher in the east of the borough than the west. Easy access to low cost, high fat and high sugar food and drink is more likely to lead to obesity. We will work with local fast food outlets to promote healthier choices, and promote healthy eating through children's centres and school initiatives. Haringey also has higher teenage pregnancy rates than other areas, - linked to poverty and low educational attainment - low breastfeeding rates and low take up of immunisation programmes that impact on the health of babies.

### What we know about Haringey

- Approximately one in every 200 babies in Haringey dies before they are 1 year old, which is now lower than the London and England average (NHS Information Centre 2009-11)
- Although the number of teenage pregnancies is falling locally, levels remain higher amongst mixed White and Black Caribbean communities, and in the east of the borough. The teenage pregnancy rate was 36.2 per 1000 in 2011, compared to 49.2 per 1000 in 2010.
- Currently only 71.6% of women book early for antenatal care. Black African and young women under 20 tend to book late for maternity care. (Data from quarters 1– 3 2012/13)
- The current breastfeeding rate is 75.4%; the number of mothers who breastfeed is considerably lower in the east compared with the west of the borough. (Data from quarter 3 2012/13)
- Vaccination rates are increasing but are still too low to protect the local population effectively. The current rate for the first MMR vaccination at 2 years is 90.0%. (Data from quarter 4 2012/13)
- Approximately one in every eight children is obese when they start school. By year 6 this increases to one in every four children. There are variations in obesity prevalence based on ethnicity; in reception 11.5% of White British children are obese compared to 18.2% of Black African children. (Data from 2012)
- There are around 2,534 children and young people with mental health problems, with the highest rates in the centre and east of the borough.

## Outcome 2: Every child has a healthy start in life

### Priorities

#### 4. Reduce infant mortality

- Encourage pregnant women to give up smoking
- Train frontline staff in prevention of sudden unexpected death in infancy
- Increase the number of women seeking early support from ante-natal and post-natal services, especially Black African women
- Promote breastfeeding
- Provide intensive support to young first time mothers through the Family Nurse Partnership
- Raise awareness of the importance of vaccination to increase levels of take up

#### 5. Reduce teenage pregnancy

- Provide targeted, relevant and accessible sex and relationship education to children and young people
- Increase young people's access to contraception

#### 6. Reduce childhood obesity

- Promote a healthy and balanced diet for families
- Reduce barriers to, and increase opportunities for, taking up physical activity amongst children and their families
- Explore ways to limit the number of fast food outlets in the borough, and work with existing outlets to make their food healthier
- Train staff in school and children's centres to recognise child obesity and discuss it sensitively with families

#### 7. Promote the emotional wellbeing of children and young people

- Provide accessible and non-stigmatising mental health services for children, adolescents and their families, in community settings

### Delivery strategies and work programmes

- [Haringey's Health and Well-being Strategy 2012-15 and delivery plans](#)
- [Improving the health and wellbeing of people in Haringey: Clinical Commissioning Group \(CCG\)](#)
- [Barnet, Enfield and Haringey Mental Health Trust Clinical Strategy 2013-18](#)
- The [Healthy Child Programme](#) based at the Whittington and North Middlesex hospitals for the early life stages focuses on a universal preventative service, providing families with a programme of screening, immunisation, health and development reviews, supplemented by advice around health, wellbeing and parenting.
- The [Family Nurse Partnership](#) (FNP) based at the Whittington Hospital – a preventative programme for young first time mothers

## Outcome 3: Thriving families

### Why this is important

Many families in Haringey are thriving, providing opportunities for their children to lead fulfilling lives. Other families need support to thrive and the impact of deprivation on their daily lives is considerable. The effects of poverty in childhood, including living in a low income family and in poor quality housing, can be felt into adulthood and can affect every part of a child's life - from economic and material disadvantages to impacting negatively on health and education. Some parents need support to fulfil their responsibilities to their children. We know also that we have high incidences of domestic violence in Haringey, which can impact on the emotional wellbeing of the children as well as the adults in a household.

Play and leisure opportunities can help children gain confidence and develop social and emotional skills. Having safe places to 'hang out' and meet with friends is crucial. The threat of an increase in overcrowded households is likely to impact on the range of available places to play and study.

### What we know about Haringey

- In 2010 33.6% of children were living in poverty. The highest child poverty rates are in: White Hart Lane, Northumberland Park and Noel Park wards.
- 72.6% of children living in poverty live in lone parent households.
- 87% of children eligible for free school meals live in the east of the borough.
- 52% of adults in Hornsey and Wood Green parliamentary constituency have a certificate of higher education, degree or equivalent compared to 29.3% in Tottenham parliamentary constituency. (2011 Census ONS)
- 18% of residents have no qualifications (18% London). (2011 Census ONS)
- The median weekly wage in Haringey is £551 (London £653). (2012 ONS annual survey of hours and earnings)
- There are 7,388 households that have dependent children and no adults in employment (14.8% in Northumberland Park compared to 1.6% in Crouch End). (2011 Census ONS)
- 10.4% of households are lone parents, Northumberland Park has the most.
- 5,000 under 18 year olds live in temporary accommodation (July 2013).
- 723 children (that we know of) provide unpaid care to family members.
- There are 11,445 households with children living in accommodation classified as overcrowded. (2011 Census ONS)

## Outcome 3: Thriving families

### Priorities

#### 8. Provide early help to families, in particular those experiencing the impact of poverty and deprivation

- Encourage take up of free school meals
- Develop a better integrated approach to family support through our children's centres
- Facilitate early help services for families of users of mental health services and drug services
- Revise the Common Assessment Framework process to provide children, young people and their families with timely, co-ordinated and effective early help

#### 9. Ensure that parents are supported to find work and maximise their income

- Improve skills, educational levels and employability of parents
- Support and enable people to move from benefits into work through increasing financial literacy/money management skills and awareness of benefits available for working parents
- Maximise the opportunities for employment and training through access to affordable and inclusive good quality child care
- Ensure the provision of quality assured financial advice services
- Increase membership of Haringey's Credit Union

#### 10. Ensure that children and young people have a decent place to live

- Intervene early to tackle and prevent homelessness
- Provide tenancy training for care leavers to prepare them for

### Priorities

independent living

- Expand the council's stock of supported living schemes to include housing for male care leavers and young people with learning disabilities
- Support and promote Haringey's supported lodgings and mediation scheme
- Always take account of the support needs of homeless families with children on a child protection plan when deciding temporary accommodation placements
- Ensure that children and young people have access to outdoor spaces and leisure opportunities e.g. parks, play workers, library work spaces

### Delivery strategies and work programmes:

- [Child Poverty Strategy and delivery plan](#)
- Early Years Action Plan (in development)
- Haringey Families First programme
- Credit Union Collaborative Working Plan (in development)
- [Jobs for Haringey](#) programme including [Haringey Jobs Fund](#)
- [Tottenham Regeneration programme](#)
- [Tottenham Active!](#) (Health improvement programme)
- [Worklife](#)
- [The Family Work and Enterprise Hub](#)
- European Social Fund Families programme (delivered by Reed in Partnership)
- Haringey Adult Learning Service Family Learning Curriculum Plan
- [Homelessness Strategy 2012-14](#)

## Outcome 4: Raised educational attainment

### Why this is important

We want all of the borough's children and young people to do well at school and reach their potential. We want young people to be ambitious about their futures, set goals and achieve their ambitions. Many pupils receive an excellent education, with some schools achieving exceptional results and many seeing considerable improvements in attainment in recent years.

A number of our schools face significant challenges in terms of levels of poverty, diversity and mobility of the school population and the proportion of children with special educational needs, which are often higher than the London average.

The right skills and experiences of training and employment help to promote economic independence for the rest of a young person's life. We will ensure there is a range of educational and training opportunities that meet the needs of our young residents and help them prepare for their futures.

### What we know about Haringey<sup>4</sup>

---

<sup>4</sup> The 2013 results are not yet validated and may change slightly over the period to December 2013.

- At the end of July 2013, 75% of primary schools and 100% of secondary schools had an Ofsted rating of good or better.
- Attainment at the Early Years Foundation Stage in 2013 is 50% which represents an improvement on 2012 and brings Haringey closer to the national average of 52%.
- Key Stage 1 2013 results (age 5 – 7 years) have improved significantly on 2012. Reading level 2B+ up from 72% to 78%, writing 59% to 64%, maths 71% to 76%.
- Attainment at Key Stage 2 2013 (age 7 – 11 years) has increased from 74% to 75% in combined reading, writing and maths.
- 2013 attainment at GCSE has improved from 58.6% to 63.6% for 5+ A\* - C (including English and maths).
- The 2013 Post 16 Level 3 results have improved with the percentage of students obtaining higher grades A\* A increasing from 28% to 34% and A\* B from 54% to 60%.
- There are significant differences in attainment between ethnic groups and between children eligible for free school meals and those who are not.
- There are significant differences in school exclusion rates between different ethnic groups.
- In 2012, more Haringey children were on 'school action' than the London and national averages ('school action' is provided when there is evidence that a child is not making progress and action is needed to meet learning difficulties).
- There are 1,308 pupils in Haringey schools with a statement of special educational needs - 3.2% of pupils compared to 2.8%

## Outcome 4: Raised educational attainment

### Priorities

#### 11. Enhance access to and quality of teaching and learning

- Ensure sufficient nursery places for 'vulnerable' two year olds and that children's centres reach families most in need of places<sup>5</sup>
- Improve the quality of all Early Years provision
- Raise the quality of teaching in all schools
- Ensure every school sets an individual and challenging target that will contribute to the borough ambition of exceeding London averages by 2015 for Key Stage 2 and GCSE results
- Create an early warning system for schools categorised by Ofsted as needing intensive or targeted support
- Ensure a range of sufficient local high quality early years, school and post-16 places where they are needed now and in the future
- Prepare for Raising the Participation Age
- Prepare young people for work by ensuring a wide range of accessible learning opportunities

#### 12. Strengthen leadership

- Scope and implement a leadership strategy for schools that identifies talent and plans for succession
- Sustain school improvement through developing school-to-school support and effective local authority School Improvement Advisers
- Review and agree a new governance model for schools
- Review and re-commission core statutory services to schools

#### 13. Empower parents and carers

<sup>5</sup> This includes two year olds from families whose earnings and benefits fall within the criteria used to determine eligibility for free school meals, and those who are looked after by the local authority.

### Priorities

- Develop an annual scorecard of the borough's schools for parents
- Commission independent information, advice and advocacy for families about how to support their child's learning
- Create opportunities to engage parents in discussions about education developments

#### 14. Facilitate collaboration and support wider educational opportunities

- Showcase outstanding teaching and learning in the borough to ensure best practice is shared
- Celebrate success of our schools
- Develop a wider range of opportunities for young people aged 16+ who are not in education, employment or training (NEET)
- Establish links with universities, including those from the Russell Group<sup>6</sup>
- Establish links to provide educational, cultural & leisure opportunities

### Delivery strategies and work programmes

- [Outstanding For All](#) – Haringey's Education Commission Action Plan
- [Strategy for school improvement](#) – in development
- Early years commissioning framework – in development
- Framework for planning education and training provision – in development
- Raising of the participation age plan<sup>7</sup>

<sup>6</sup> The Russell Group represents 24 UK universities, which are committed to high quality research, an outstanding teaching and learning experience and strong links with business and the public sector.



---

<sup>7</sup> Under the Education and Skills Act 2008, all young people up to age 18 will be required from 2015 to participate in education or training. From summer 2013, this will apply to young people until the end of the academic year in which they turn 17, and from summer 2015 onwards it will apply until their 18th birthday.

## Outcome 5: Children and young people are safer from the risk of harm

### Why this is important

Most children and young people in Haringey lead safe and secure lives at home, at school and in their communities. Some may experience abuse or bullying, become involved in crime or are victims of crime. Other children experience abuse that makes it necessary for the local authority to intervene to ensure their safety. Abuse of children can have both short and long term effects on their health and life outcomes. Sometimes, children and young people who have experienced abuse become 'looked after' by the local authority which then has a duty to act as a 'good parent' to these children. In Haringey the numbers of 'looked after' children have historically been high over the past few years although they are now reducing.

Domestic and gender-based violence is an issue in the majority of child protection plans in Haringey; 'adult' problems such as mental ill health and substance misuse are linked to domestic violence and have an impact on children.

There are many risk factors for youth offending, including family conflict, low income, poor housing, low achievement, living in a disadvantaged neighbourhood, availability of drugs and high population turnover. Personal factors are known to be hyperactivity and early involvement in substance misuse. The risk factors for youth offending overlap to a large degree with those for educational underachievement, young parenthood, and adolescent mental health problems. Early action to address these risk factors can help to prevent a range of poor life chances.

### What we know about Haringey

- 275 children were subject to child protection plans in March 2013 and this figure has been reducing. The vast majority (88%) live east of the railway line, 12% live in the west.
- There were 541 Looked After Children in March 2013, a rate of 94 per 10,000 population, well above the statistical neighbours average of 74 per 10,000.
- Domestic violence (DV) was a concern for 66% of children who had a child protection conference during 2012/13 (345 children). A significant majority of recorded DV offences are in the east of Haringey. (Data for Oct 2011 - Sep 2012.)
- 41% of crime is committed in five wards: Noel Park, Tottenham Green, Northumberland Park, Tottenham Hale and Bruce Grove. (Data for Oct 2011 - Sep 2012.)
- Serious acquisitive crime such as burglary and robbery, and the majority of gun and knife crime, tends to be committed by young men aged 15 to 24. (Data for Oct 2011 - Sep 2012.)
- The number of perpetrators of crime aged 15-17 and, in the case of personal robbery, 10-14 year olds, is disproportionately high. (Data for Oct 2011 - Sep 2012.)
- 58% of those accused of gang-related offences are aged 15-17. The majority of people involved in gangs live in Tottenham and Wood Green. (Data for Oct 2011 - Sep 2012.)
- Youth reoffending increased by 10% in the latest available data (12 months to June 2011) compared to the previous full year. 48% of young offenders reoffend within a year. (Youth Justice Board data)

## Outcome 5: Children and young people are safer from the risk of harm

### Priorities

#### 15. Safeguard children and young people from abuse and neglect wherever possible, and deal with it appropriately and effectively where it does occur

- Strengthen links between schools and safeguarding services to keep children and young people as safe as possible
- Identify missing, unknown or 'opted out' young people
- Identify and respond to children and young people at risk of sexual exploitation, including gang and group violence
- Review access to social care services to ensure that all children who would benefit from protection planning access it in a timely way and with an initial early help offer where appropriate

#### 16. Reduce the incidence and impact of domestic violence on children and young people

- Improve awareness of domestic violence in communities & schools
- Roll out the identification and referral (IRIS) process to GP surgeries
- Increase provision of safety planning support for high risk victims
- Increase uptake of accredited perpetrator programmes
- Develop understanding of & measurements for wider gender-based offences (e.g. female genital mutilation, forced marriage, sexual crimes)

#### 17. Reduce re-offending (including a focus on 16-24 year olds)

- Establish a co-located and Integrated Offender Management (IOM) team including a focus on youth to reduce reoffending
- Commission forensic services to meet the mental health needs of the cohort
- Commission drug intervention to cover alcohol, cannabis and "club

### Priorities

- drugs"
- Develop and deliver a pre-release programme for young people who have committed violent crime
- Develop a mentoring scheme for 8-12yrs olds who are siblings or relatives of gang members
- Develop a skills programme to enable young people to build the skills to be safe, social and successful in employment
- Assist the resettlement of young people and their families who are at risk of harm from serious, often gang related violence
- Strengthen joint working to enable young people to be more resilient to the pressures of gang related activity and offending behaviour
- Develop focus on intensive individual and family support particularly for those on the edge of care, offending and bullying
- Ensure that young people have a voice so that they can, if they want to, contribute to local, regional and national decision making

### Delivery strategies and work programmes

- [Local Safeguarding Children Board](#) Plan
- Haringey Annual Youth Justice Plan
- Corporate Parenting Action Plan
- [Strategy for Young People](#)
- [Community Safety Strategy and delivery plan](#)
- **Multi Agency Safeguarding Hub (MASH)** and **First Response Multi Agency Team** which co-locates police, health colleagues and social workers, together with support from education and housing.
- ['Safe and Secure'](#) (a scheme which provides a joint framework for Police, local authorities and other key partners to move families at high risk as a result of their being associated with, or targeted by, persons involved in gang activity.)

## 6. Delivering and monitoring this plan

The Trust will oversee the monitoring of the quality of all children and young people's services offered locally and will work closely with Haringey's other key partnership boards – the [Local Safeguarding Children's Board](#), the [Health and Wellbeing Board](#) and the [Community Safety Partnership](#) as well as children, young people and their families, including through the Children in Care Council and the Youth Council.

The vision and priorities described in this Plan will be delivered through a variety of work programmes and strategies, details of which are provided under each outcome. The outcomes will be monitored and reviewed on a six monthly basis by the Children's Trust and revised annually, to ensure that this Plan is helping to make a difference.

Work to deliver each outcome will be overseen by a member of the Children's Trust and led by existing groups which will act as delivery groups (see table). The Leads will report progress to the Children's Trust. Where there are particular concerns or our service offer is found to have little impact, we will challenge each other to take decisive action. Where services are found to have a positive impact on children's lives, we will explore how we can extend this good practice to other areas of work.

Outcome	Delivery groups
<b>1. Quality services</b>	<ul style="list-style-type: none"> <li>Children's Trust</li> </ul>
<b>2. Every child has a healthy start in life</b>	<ul style="list-style-type: none"> <li>Joint Health and Wellbeing Board and Children's Trust delivery group</li> </ul>
<b>3. Thriving families</b>	<ul style="list-style-type: none"> <li>Haringey Families First Steering Group</li> <li>Common Assessment Framework (CAF) Delivery Group</li> </ul>
<b>4. Raised educational attainment</b>	<ul style="list-style-type: none"> <li>Outstanding for All Delivery group</li> <li>Raising the Participation Age Partnership</li> <li>School Improvement Partnership Group</li> </ul>
<b>5. Children and young people are safe from the risk of harm</b>	<ul style="list-style-type: none"> <li>Local Safeguarding Children Board</li> <li>Community Safety Partnership</li> <li>Domestic Violence Strategic Group</li> </ul>

## Appendix 1: Haringey Children's Trust

Haringey Children's Trust is a partnership that brings together the local organisations responsible for services for children, young people and families in a shared commitment to improving children's lives. It is a formal decision making body that meets six times per year, led by the council. The Children's Trust has statutory membership under the Children Act (2004) and comprises agencies with a significant budget for children and young people. It looks specifically at the strategic planning of services for children, young people and families in Haringey and delivery of commissioning arrangements. The Children's Trust is not a separate organisation in its own right; each partner retains its own responsibilities while working together to join up services to support the wellbeing of all children.

In addition, Haringey has established a Children's Partnership Group, which acts in advisory capacity to the Children's Trust and meets twice a year with the Children's Trust. It has wide, flexible membership including providers and staff across all the partner agencies.

<b>Membership of the Haringey Children's Trust</b>	
<b>Haringey Council</b>	
<ul style="list-style-type: none"> <li>• Lead Member for Children's Services - Chair of Trust</li> <li>• Leader of the Council</li> <li>• Director of Children's Services</li> <li>• Director of Public Health</li> <li>• Deputy Director Commissioning</li> <li>• Deputy Director Prevention and Early Help</li> <li>• Assistant Director Safeguarding</li> <li>• Assistant Director for Schools and Learning</li> </ul>	
<b>Metropolitan Police Service</b>	
Borough Commander	
<b>Probation</b>	
Assistant Chief Officer	
<b>Haringey Clinical Commissioning Group</b>	
<ul style="list-style-type: none"> <li>• Head of Children's Commissioning</li> <li>• Lead GP</li> </ul>	
<b>Schools and Colleges</b>	
<ul style="list-style-type: none"> <li>• Head Teacher, Special Schools</li> <li>• Head Teacher, Primary Schools</li> <li>• Head Teacher, Secondary Schools</li> <li>• Principal, College of Haringey, Enfield and North East London (CHENEL)</li> </ul>	
<b>Local Safeguarding Children Board (ex-officio)</b>	
Independent Chair of Local Safeguarding Children's Board (LSCB)	

## Appendix 2: Key achievements 2009-2013

### **Be healthy**

- A steady decline in the infant mortality rate.
- Steady increase in coverage of childhood vaccinations since 2008 and a significant improvement in 2011/12.
- The number of teenage pregnancies is falling.

### **Stay safe**

- The government ended its oversight of children's safeguarding services in 2011, following significant improvements.
- The Multi-Agency Safeguarding Hub (MASH) was established in 2012.

### **Enjoy and achieve**

- In 2013, our students achieved their best ever GCSE and A-level results.
- 70% of Haringey's primary schools and all secondary schools are rated 'good' or 'outstanding' by Ofsted.
- Haringey won the fight for fairer funding following a long campaign by the council, trade unions, schools and local MPs to end an anomaly that has seen the borough miss out on millions of pounds of funding for local schools.

### **Make a positive contribution**

Haringey has:

- A thriving *Youth Council* that meets monthly representing the views of young people.
- *Young Commissioners* aged 13-19 who since January 2012 have contributed to the commissioning of services for young people. They have learnt the skills necessary to articulate their priorities based on the analysis of needs.
- *Aspire* - a youth-led group for young people in care and leaving care. The Leadership Team, comprising young people who have been in care in Haringey, meets weekly to plan events, discuss emerging themes for young people in care with local decision makers, and consult with groups and services who work with young people in care/leaving care and try to represent their voices.

### **Achieve economic wellbeing**

- The proportion of 16 – 19 year olds not in education, employment or training has fallen from 6.8% in 2009/10 to 3.7% in 2012/13.
- The *Jobs for Haringey programme* was launched in April 2012. Of the 221 residents who have since started work, 36% are 16 to 24 year

olds. Further development of work skills programmes focussing on young people is under way.

## Appendix 3: How we developed this plan

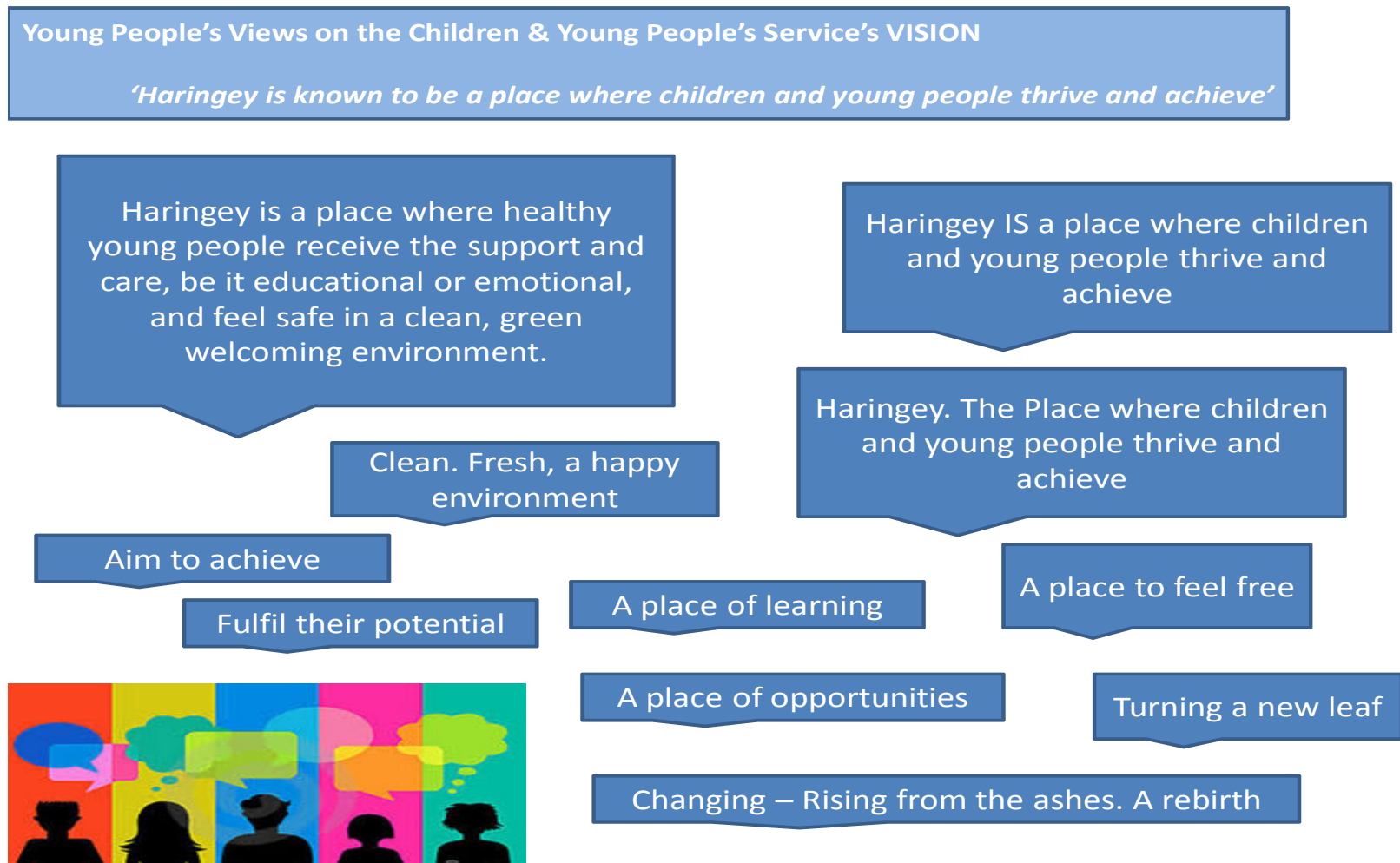
We have taken account of information from a variety of sources in developing this draft plan including:

- Recent **legislative developments** regarding children and young people
  - **Analysis of data** including local performance information, our joint strategic needs assessment and detailed needs assessments
  - **Evidence from a wide range of local initiatives** from organisations working across the borough about current outcomes for children and young people; this includes work programmes such as the Multi-agency Safeguarding Hub (MASH) and Jobs for Haringey
  - Information from **two development workshops** (March and May 2013) with members of the Children's Trust
  - **Feedback from regular meetings**, such as our Youth Council, Children in Care Council and Corporate Parenting Committee
  - **A workshop with young people** to find out their thoughts on the Plan's vision was held on 17<sup>th</sup> September 2013. The young people included representatives from Aspire, Haringey's Children in Care Council, and the Haringey Young Commissioners (see next page).
  - Feedback from **consultation received through the website** on this document has been incorporated into the plan
- Haringey residents' views and opinions given in **recent consultations** about issues affecting children, young people and their families, including the:
    - Health and Wellbeing Strategy
    - Housing Strategy
    - Drug and alcohol treatment
    - Healthwatch Haringey
    - Sports facilities: Finsbury Park & Lordship Recreation Ground
    - Child Poverty Strategy
    - Strategy for Young People
    - Early Help Policy
    - Outstanding for All, Haringey's Education Commission
    - Haringey's vision for education
    - School admissions criteria
    - Expansion of school places
    - Community Safety Strategy



A **public promise** for children, young people and their parents is being developed and will be consulted on shortly.

**Feedback from workshop with young people** held on 17<sup>th</sup> September 2013 is shown below:



Young People's Views on the Children & Young People's Service's VISION

*'Haringey is known to be a place where children and young people thrive and achieve'*

Achievement isn't showcased (i.e. Spirit of London at the O2 is good, but people don't know about it and it isn't local)

Young people have a bad reputation. Using 'Is Known' in the vision makes us look bad.

Safety is a massive issue. Some places are so gloomy and dirty.

We don't think it should be 'Is Known to be' because that means its not – why are we always focussing on the negative?

Its awkward when you're somewhere and you have to say which borough you're from

Would like a more creative and positive environment (community art etc)

What about using the riots? Nobody wants to talk about the bad things but they should be acknowledged so that we can change

Going from where we are to somewhere new.



## Appendix 4: Equalities Impact Assessment Summary

### Introduction

An initial Equalities Impact Assessment (EqIA) has been carried out to identify where protected groups of children and young people may be adversely affected by the proposed Children and Young People's Plan outcomes. This EqIA does not constitute an overarching assessment of all issues regarding children and young people in Haringey; its intention is to identify any equalities issues with the outcomes in the plan.

For a snapshot of issues relating to children and young people, please see the [storyboards](#) on the Haringey Council website. Detailed assessments of issues affecting children, young people and their families are shown in the:

- [Child Poverty Needs Assessment](#)
- [Haringey Joint Strategic Needs Assessment – Health of Mothers, Children and Young People](#)
- [Domestic and gender based violence in Haringey: needs assessment](#)
- [Rapid health needs assessment for looked after children in Haringey](#)
- [Roma and Irish Traveller Needs Assessment](#)

Summary data relating to each outcome is included in the Plan.

A number of separate EqIAs have been developed for existing strategies that inform this one (the relevant strategies are listed under each outcome in the Plan). Rather than repeat their data and analysis here, key points are given.

Below is a summary of the key issues raised in the EqIA. Actions to address these issues will be monitored at the Children's Trust and included in the Council's performance reports where appropriate. Where the data does not exist the EqIA will highlight this and make recommendations for remedying this.

Work to deliver each outcome of the Plan will be overseen by a member of the Children's Trust and led by existing groups which will act as delivery groups (see p.19 of the Plan). These delivery groups will ensure that equalities issues that fall within their area of work are addressed. The Children's Trust Board will be responsible for addressing cross-cutting equalities issues.

**Overall it has been found that the outcomes and priorities in the Plan are likely to reduce the barriers for protected groups of children and young people in relation to: health, child poverty, education and the safeguarding of vulnerable children.**

Further analysis will be undertaken following public consultation on the proposed public promise / charter.

Issue	Key evidence of likely adverse impact	Action required	Responsible Lead
<b>Data collection and monitoring</b>	<p>Gaps in data have been highlighted in the various needs assessments to which this EqlA refers. More evidence and data would be useful particularly for:</p> <ul style="list-style-type: none"> <li>• young carers</li> <li>• children and young people with disabilities</li> <li>• children and young people in Roma and Irish Traveller communities</li> <li>• children and young people subject to Female Genital Mutilation and forced marriage</li> </ul>	<p>Agree how data collection and monitoring of the following protected characteristics across services can be improved in particular in relation to:</p> <ul style="list-style-type: none"> <li>• Religion or Belief</li> <li>• Sexual Orientation</li> </ul>	Children's Trust
<b>Health</b>	<ul style="list-style-type: none"> <li>• Approximately one in every eight children is obese when they start school.</li> <li>• By year 6 this increases to one in every four children.</li> <li>• There are ethnic variations in obesity prevalence; in 2012 11.5% of White British reception age children were obese compared to 18.2% of Black African children.</li> </ul>	<p>Reduce childhood obesity to include targeting Black and Minority Ethnic (BME) children many of whom live in the east of the borough.</p> <p>See <a href="#">Health and Wellbeing Strategy</a> actions</p>	<p>Public Health</p> <p>Health and Wellbeing Board</p>
<b>Child poverty</b>	<p>In 2010 33% of children were living in poverty.</p> <ul style="list-style-type: none"> <li>• The highest child poverty rates are in: White Hart Lane, Northumberland Park and Noel Park wards.</li> <li>• 72.6% of children in poverty live in lone parent households.</li> <li>• 87% of children eligible for free school meals live in the east of the borough.</li> <li>• The largest BME groups which are most likely to be on housing benefit (HB) and with children attending Haringey schools are White Irish Travellers, Somalis, Kurdish, Kosovan and Turkish.</li> </ul>	<p>See <a href="#">Child Poverty Strategy</a> actions</p>	<p>Families First Steering Group</p> <p>Common Assessment Framework (CAF) Delivery Group</p>

Issue	Key evidence of likely adverse impact	Action required	Responsible Lead
<b>Education</b>	<ul style="list-style-type: none"> <li>Only half (51%) of the children living in the most deprived areas of the borough achieved a good level of development in the Early Years Foundation stage compared to 64% children living in other areas. (Income deprivation Affecting Children Index - IDACI)</li> <li>School attendance by Irish Traveller pupils in Haringey is below the national average. There are a significant number of Traveller children missing education (especially Roma).</li> </ul>	Actions needed to ensure uptake of free childcare for vulnerable two year olds and to increase uptake of free childcare for 3-4 year olds in Gypsy, Roma and Traveller, Black African, Turkish & Kurdish families.	Children and Young People's Service, Haringey Council
	<p>There are significant differences in attainment between:</p> <ul style="list-style-type: none"> <li>ethnic groups</li> <li>children eligible for free schools meals and those who are not</li> </ul>	To be included in Outstanding for All action Plan.	Outstanding for All delivery Group
	<p>There are significant differences in social exclusion rates between ethnic groups.</p>	To be included in Outstanding for All action Plan.	School Improvement Partnership Group
<b>Safeguarding of vulnerable children</b>	<ul style="list-style-type: none"> <li>275 children were subject to child protection plans in March 2013 and this figure has been reducing.</li> <li>The vast majority (88%) live east of the railway line, 12% live in the west.</li> </ul>	Focus on east of borough.	Local Safeguarding Children's Board
	<ul style="list-style-type: none"> <li>Domestic violence was a concern for 66% of children who had a child protection conference during 2012/13 (345 children).</li> <li>A significant majority of recorded offences are in the east of Haringey. (Data for Oct 2011 - Sep 2012.)</li> </ul>	Focus on east of borough.	Domestic Violence Strategic Group

## Appendix 5: The national context

There has been a proliferation of legislation and initiatives in recent years affecting children, young people and their families.

[Reform of the Early Years Foundation Stage](#): these reforms build on the review by Dame Claire Tickell of the Early Years Foundation Stage. They slim down the curriculum for 0-5 year olds, place a greater focus on getting children ready for school, and allow free childcare entitlement to be more flexible for parents.

[Proposed changes to childcare regulations](#): these set out the government's proposals to increase the supply of high quality, affordable childcare and education.

[The Academies Act 2010](#): the Act aims to make it possible for all publicly funded schools in England to become academies, still publicly funded but with greater autonomy. Free schools were given also approval in the Academies Act 2010

[The Education Act 2011](#): this expands the academies programme to allow 16-19 and alternative provision academies. It allows schools and colleges to be exempted from routine inspection and gives parents of disadvantaged two-year-olds a right to 15 hours free Early Years provision a week. The Act extends the academies and free schools programme further by:

- reforming the procedure for establishing new schools, to give preference to academies and free schools
- establishing academies for 16 to 19 year olds and alternative provision academies for the most vulnerable children

[Proposals to reform Key Stage 4 qualifications](#): the government is consulting on proposals for comprehensive reform of the GCSE qualification, with a specification that they describe as more challenging, more ambitious and more rigorous. In summary, the proposals include:

- Exams at the end of courses to account for final mark in most subjects.
- A\*-G grades to be replaced by eight (highest) to one (lowest) grades.
- Two-year courses to become standard, ending modular courses.
- Coursework and assessment to be scrapped in all but science.
- First exams using the new GCSE structure to take place in 2017.
- Simpler 'tiered' exams for less able students to disappear except in science and maths.

The [Pupil Premium](#): this is additional funding given to schools to support disadvantaged pupils and close the attainment gap between them and their peers.

Proposed changes in support and services for children and young people with [Special Educational Needs](#) (SEN): changes will include a new duty for joint commissioning of services between local authorities and health bodies, and a requirement on local

authorities to publish a local offer of services for disabled young people and those with SEN.

[Raising the Participation Age](#) (RPA): from summer 2013, all young people up until the end of the academic year in which they turn 17 will be required to participate in education or training. From 2015, this requirement will apply until their 18th birthday. **Young people currently in Year 11 and below are affected.** RPA does not mean young people must stay in school; they will be able to choose one of the following options post-16:

- full-time education at school, college or home
- an apprenticeship
- part-time education or training if they are employed, self-employed or volunteering full-time (20+ hours per week)

[The Health and Social Care Act 2012](#) covered the:

- Introduction of statutory local Health and Wellbeing Boards to ensure coordination and integration of public health, NHS and social care services.
- Transfer of responsibility for much of public health commissioning to local authorities (at a local level) and Public Health England (a new national body)
- A new independent NHS Board to allocate resources and provide commissioning guidance
- Increase in GPs' powers to commission services
- A strengthened role for the Care Quality Commission
- Monitor, the body that currently regulates NHS foundation trusts, to be developed into an economic regulator to oversee aspects of access and competition in the NHS

- A cut in the number of health bodies, including abolishing Primary Care Trusts and Strategic Health Authorities.

The [Welfare Reform Act 2012](#) reforms welfare to improve work incentives, simplify the benefits system and tackle administrative complexity. In summary it:

- Introduces a single Universal Credit, which will replace six income-related work-based benefits
- Limits the payment of contributory Employment and Support Allowance to a 12-month period
- Caps the total amount of benefit that can be claimed, including specific caps on housing allowance
- Reforms the Social Fund and replaces it with locally based provision delivered by local authorities

The [Troubled Families Initiative](#): through this initiative, local authorities are working to support families to get children back into school, reduce crime and anti-social behaviour, put adults on a path into work, and reduce the costs that 'troubled families' place on the public sector.

The national [Child Poverty Strategy](#) 2011 builds on the [Child Poverty Act 2010](#). It draws on reports by Graham Allen on [early intervention](#), and a report by Frank Field about [Foundation Years: Preventing Poor Children Becoming Poor Adults](#).

Revised [statutory guidance](#) on safeguarding children: including the [Munro report](#) recommendations on child protection.

[Government proposals on adoption](#): these proposals aim to speed up the process for children; to overhaul the service for prospective adopters; and to strengthen local accountability for the timeliness of adoption services.